



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Reniero et al.
Appl. No.: 09/936,542
Conf. No.: 7122
Filed: September 10, 2001
Title: LACTOBACILLUS STRAINS CAPABLE OF PREVENTING DIARRHOEA
CAUSED BY PATHOGENIC BACTERIA AND ROTAVIRUSES
Art Unit: 1651
Examiner: D. Ware
Docket No.: 112843-032

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action dated October 2, 2003, please amend the above-identified patent application as follows:



Amendments to the Specification begin on page 2 of this paper.

Amendments to the Claims are reflected in the listing of claims which begins on page 4 of this paper.

Remarks begin on page 8 of this paper.

Image

1651

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No.	
Applicant(s): Reniero et al				112843-032	
Serial No. 09/936,542	Filing Date September 10, 2001	Examiner D. Ware	Group Art Unit 1651		
Invention: LACTOBACILLUS STRAINS CAPABLE OF PREVENTING DIARRHOEA CAUSED BY PATHOGENIC BACTERIA AND ROTAVIRUSES					
<u>TO THE COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	21 -	22 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	7 -	7 =	0 x	\$86.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____					
<input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 02-1818					
<input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.					
<input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 Signature			Dated: December 30, 2003		
Thomas C. Basso Reg. No. 46,541 BELL, BOYD & LLOYD LLC P.O. Box 1135 Chicago, IL 60690-1135 Phone: 312-807-4310			<div>I certify that this document and fee is being deposited on 12-30-2003 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</div> <div> Signature of Person Mailing Correspondence</div> <div>Renee Street Typed or Printed Name of Person Mailing Correspondence</div>		
CC:					